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SERIAL NUMBER 10/824,983	FILING OR 371(c) DATE 04/15/2004 RULE	CLASS 600	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 146462IT (5024- 00124)
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APPLICANTS

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**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 2	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

26753

TITLE

System and method for assessing a patient's risk of sudden cardiac death

FILING FEE RECEIVED 1260	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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